POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	*BA*	*7C-385*	
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW		*5-157~*	*10-5*

INDEX OF CLAIMS

✔ .... Rejected	N .... Non-elected
= .... Allowed	I .... Interference
– (Through numeral)... Canceled	A .... Appeal
÷ .... Restricted	O .... Objected

Claim Final	Original	4 7 02	12 26 02							Date
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	4	✓								
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If more than 150 claims or 10 actions
staple additional sheet here

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